								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  Oqqoo 2 65													
. CLAIMS AS FILED - PART I (Column 1)					mn 2)		SMAL TYPE		VIIIV	OR	OTHER SMALL 1		
TO	TAL CLAIMS	12	12				RAT	E	FEE	1 1	RATE	FEE	
FC	R		NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	Basic Fee	710.00	
Τ	ITAL CHARGEABLE CLAIMS	12 min	/2_minus 20=		· \$		X\$ 9=			OR	X\$18=		
	EPENDENT CLAIMS				10		X40=			OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT							+13	5=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column?							TOT	AL		OR	TOTAL	710	
CLAIMS AS AMENDED - PART II									CAIFITY	00	OTHER SMALL		
_	(Column 1			umn 2) (Column 3)			SMA	····	ENTITY	OR I	SMALL	ADDI-	
AMENDMENT A	REMAINING AFTER AMENDMEN		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		FA		ADDI- TIONAL FEE		RATE	TIONAL FEE	
	Total · 2	Minus	. 2	6	2		X\$	9=		OR	X\$18=		
	Independent - 3	Minus	••• (	3	=		X40	) <u>=</u>		OR	X80≃		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT			T CLAIM		1	+13	S=	·	OR	+270=		
								TAL		00	TOTAL		
9	26/05 (Column 1	1	(Coh)	mn 2)	(Column 3)		ADOIT.	FEE			ADDIT. FEE		
AMENDMENT B	CLAIMS		HIG	HEST		1			ADDI-			ADDI-	
	REMAINING AFTER AMENDMEN		PREVI	BER OUSLY FOR	PRESENT		.RA1	Έ	TIONAL FEE		RATE	TIONAL FEE	
	Total · / O	Minus	"6	20	-		X\$	9=	1	OR	X\$18=		
	Independent - 3	Minus	3		= /		X40	)== -		OR	X80=	<i>/</i> -	
L	FIRST PRESENTATION OF	MULTIPLE DEF	ENDEN	I CLAIM		1	+13	5=	1.	OR	+270=/		
							TC ADDIT.	TAL			TOTAL ADDIT FEE		
	(Column 1		(Colu	mn 2)	(Column 3)		- I ( <b>1</b> ,						
AMENDMENT C	CLAIMS		RIG	HEST MBER		11			ADDI-			ADDI-	
	REMAINING AFTER AMENDMEN		PREV	OUSLY	PRESENT	П	RAT	Έ	TIONAL FEE		RATE	TIONAL FEE	
	Total •	Minus	••		•	11	X\$ 9	)=		OR	X\$18=		
	Independent -	Minus	•••		۰		X40	)= 		00	X80≖		
L	FIRST PRESENTATION OF MULTIPLE DEPENDEN					J				OR			
	M M	an than ambas in sail.		o W in -			+13			OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE OR ADDIT. FEE ADDIT. FEE													
	"If the "Highest Number Previous! The "Highest Number Previously	Paid For (Total o	r Indepen	is ives in cont) is th	an 3, enler 3." e highest numb	er to	und in t	vo ap	propriate bo	x in co	fumn 1.		
l													

FORM PTO-875

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